

CDPHE	CDPHE			DHS	CDHS			HCPF	HCPF		
Identifier	Title	CCR	Text	Identifier	Title	CCR	Text	Identifier	Title	CCR	Text
0104	Federal and State compliance	VIII-1.2	A facility for the developmentally disabled, as defined herein, shall comply with all applicable federal and state statutes and regulations, including, but not limited to, the following:		Statutory Authority	2 CCR 503-1 Setion 16.000 et seq.	These rules are promulgated under the authorities established in Section 27-10.5, C.R.S.		HCBS Services for the Develop mentally Disabled Waiver	10 CCR 2505-10 Section 8.500.1	This section hereby incorporates the terms and provisions of the federally-approved HCBS-DD waiver.
0113	Definition-Administrator	VIII-2.1	Administrator - A person who is responsible for the overall operation and daily administration, management and maintenance of the facility.		Definition-	Section 16.120	"Program Approved Service Agency" means a developmental disabilities service agency or typical community service agency as defined in Section 16.221, which has received program approval by the Department pursuant to Section 16.230 of these rules.				Program Approved Services Agency means a developmental disability service agency or a typical community service agency as defined in 2 CCR 503.1 16.000 et seq., that has received program approval to provide HCBS-DD waiver services
0114	Definition-Community Residential Home for DD	VIII-2.2	Community Residential Home for Persons with Developmental Disabilities - a group living facility accommodating at least four but no more than eight adults, licensed by the state, where services and supports are provided to persons with developmental disabilities		Definition-Comprehensive Services	Section 16.120	"Comprehensive Services" means habilitation services and supports that provide a full day (24 hours) of services and supports to ensure the health, safety and welfare of the individual, and to provide training and habilitation services or a combination of training and supports in the areas of personal, physical, mental and social development and to promote interdependence, self-sufficiency and community inclusion. Services include residential habilitation services and supports, day habilitation services and supports and transportation.				GRSS means residential habilitation provided in group living enviornments of fout to eight lients receiving services who live in a singe residential setting, which is licened by the CDPHE as a residential care facility or resiendital community home for persons with developmental disabilities and certified by the Operating Agency.

0115	Definition-Department	VIII-2.3	Department - the Colorado Department of Public Health and Environment or its designee		Definition-Department	Section 16.120	"Department" means the Colorado Department of Human Services.				Department means the Colroado Department of Health Care Policy and Financing, the single State Medical Agency
0116	Definition of DD	VIII-2.4	Developmental Disability - a disability that is manifested before the person reaches twenty-two years of age, which constitutes a substantial disability to the affected individual, and is attributable to mental retardation or related conditions which include cerebral palsy, epilepsy, autism, or other neurological conditions when such conditions result in impairment of general intellectual functioning or adaptive behavior similar to that of a person with mental retardation		Definition of DD	Section 16.120	"Developmental Disability" means a disability that is manifested before the person reaches twenty-two (22) years of age, which constitutes a substantial disability to the affected individual, and is attributable to mental retardation or related conditions which include cerebral palsy, epilepsy, autism or other neurological conditions when such conditions result in impairment of general intellectual functioning or adaptive behavior similar to that of a person with mental retardation. Unless otherwise specifically stated, the federal definition of "Developmental Disability" found in 42 U.S.C. 6000, et seq., shall not apply. (See Order)				DEVELOPMENTAL DISABILITY means a disability that is manifested before the person reaches twenty-two (22) years of age, which constitutes a substantial disability to the affected individual, and is attributable to mental retardation or related conditions which include cerebral palsy, epilepsy, autism or other neurological conditions when such conditions result in impairment of general intellectual functioning or adaptive behavior similar to that of a person with mental retardation. Unless otherwise specifically stated, the federal definition of "developmental disability" found in 42 U.S.C. § 6000, <i>et seq.</i> , shall not apply.
0117	Definition-Facility for person with DD	VIII-2.5	Facility for Persons with Developmental Disabilities - a facility specially designed for the active treatment and habilitation of persons with developmental disabilities		Definitions-Settings for People with Developmental Disabilities	Section 16.120	"Home and Community-Based Services Waivers (HCBS)" means HCBS waiver programs, including the Home and Community Based Waiver for the Developmentally Disabled (HCBS-DD), Supported Living Services (SLS) and Children's Extensive Support (CES).				Defines GRSS, IRSS and ICF

0118	Definition-Governing Body	VIII-2.6	Governing Body - the individuals, service agency or community centered board when acting as a service agency that has the ultimate authority and legal responsibility for the management and operation of the facility		Definitions-Community Centered Board	Section 16.120	"Community Centered Board (CCB)" means a private corporation, for profit or not for profit, which, when designated pursuant to Section 27-10.5.105, C.R.S., provides case management services to persons with developmental disabilities, is authorized to determine eligibility of such persons within a specified geographical area, serves as the single point of entry for persons to receive services and supports under section 27-10.5, C.R.S., and provides authorized services and supports to such persons either directly or by purchasing such services and supports from service agencies.				COMMUNITY CENTERED BOARD (CCB) means a private corporation, for profit or not for profit, which when designated pursuant to Section 27-10.5-105, C.R.S., provides case management services to clients with developmental disabilities, is authorized to determine eligibility of such clients within a specified geographical area, serves as the single point of entry for clients to receive services and supports under Section 27-10.5-101, C.R.S. <i>et seq</i> , and provides authorized services and supports to such clients either directly or by purchasing such services and supports from service agencies.
0119	Definition-ICF-MR	VIII-2.7	Intermediate Care Facility for Persons with Developmental Disabilities - a residential facility that is certified by the Centers for Medicare and Medicaid (CMS) to provide habilitative, therapeutic and specialized support services to adults with developmental disabilities.			Section 16.120	"Regional Center" means a facility or program operated directly by the Department, which provides services and supports to persons with developmental disabilities. (Regional Centers, which operate some ICF-IDs, are located within the Division for Regional Center Operations)				INTERMEDIATE CARE FACILITY FOR THE MENTALLY RETARDED (ICF-MR) means a publicly or privately operated facility that provides health and habilitation services to a client with mental retardation or related conditions

0120	Definition: Plan Review	VIII-2.8	Plan Review - review by the Department, or its designee, of new construction or remodeling plans to ensure that the facility will maintain compliance with the applicable National Fire Protection Association (NFPA) Life Safety Code and this Chapter VIII. Plan review consists of the analysis of construction plans and onsite inspections, where warranted. For the purposes of the National Fire Protection Association requirements, the Department is the authority having jurisdiction for state licensure.		Definition-Plan Review	Section 16.120	"Program Approved Service Agency" means a developmental disabilities service agency or typical community service agency as defined in Section 16.221, which has received program approval by the Department pursuant to Section 16.230 of these rules.				silent
0121	Definition-Resident	VIII-2.9	Resident - an individual admitted to and receiving services from a facility for persons with developmental disabilities.		Definition-Client	Section 16.120	"Client" means an individual who has met Long Term Care (LTC) eligibility requirements and has been offered and agreed to receive Home and Community Based Services (HCBS) in the Children's Extensive Supports (HCBS-CES) waiver, the HCBS waiver for Persons with Developmental Disabilities (HCBS-DD) or the Supported Living Services (HCBS-SLS) waiver.				CLIENT means an individual who has met long term care (LTC) eligibility requirements, is enrolled in and chooses to receive LTC services, and receives LTC services.
0201	ICF-MR or RCF-DD license	VIII-1(A)	A facility for persons with developmental disabilities shall be licensed as either an Intermediate Care Facility for Persons with Developmental Disabilities or a Community Residential Home for Persons with Developmental Disabilities, depending upon the size of the facility and the services offered.		Service Agencies	Section 16.221	A. Pursuant to Section 27-10.5-5(28), C.R.S., a service agency may be an individual or any publicly or privately operated program, organization, or business providing services or supports for persons with developmental disabilities.				

0206	Minimum 750 feet between homes	VIII-3.2(B)	In addition to local requirements, there shall be a minimum distance between such homes of seven hundred and fifty (750) feet. Evidence of such local compliance shall be submitted to the Department in the manner requested		Group Residential Services and Supports (GRSS)	Section 16.625	A community residential home for individuals with developmental disabilities shall not be located within 750 feet of another such group home or within 750 feet of facility-based day programs or other program services operated for people with developmental disabilities unless previously approved by the Department.				silent
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0208	Chapter II compliance with ownership	VIII-3.2(C)	A facility for persons with developmental disabilities shall comply with the requirements of 6 CCR 1011-1, Chapter II, regarding license application procedures, the process for change of ownership and the continuing obligations of a licensee.		Program Approval	Section 16.230	All service agencies approved by a community centered board to provide comprehensive services shall also be approved by the Department to provide the authorized service(s) for which they have been selected prior to delivery of such services.				8.500.9.A A private or profit or not for profit agency or government agency shall meet the minimum provider qualifications as set forth in the HCBS Waiver and shall: 1. Conform to all state established standards for the specific services they provide under HCBS-DD, 2. Maintain program approval and certification from the Operating Agency, 3. Maintain and abide by all the terms of their Medicaid provider agreement with the Department and with all applicable rules and regulations set forth in 10 CCR 2505-10, Section 8.130, 4. Discontinue services to a client only after documented efforts have been made to resolve the situation that triggers such discontinuation or refusal to provide services, 5. Have written policies governing access to duplication and dissemination of information from the client's records in accordance with state statutes on confidentiality of information at § 25.5-1-116, C.R.S., as amended.
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0210	Prog Appr from DDD prior to licensure	VIII-3.2(D)	Prior to licensure, a Community Residential Home for Persons with Developmental Disabilities shall provide the Department with verification that it has obtained program approval from the Colorado Department of Human Services, Division of Developmental Disabilities to provide the relevant services		Program Approval	Section 16.230	B. A developmental disabilities service agency selected and approved by a community centered board to provide support services shall be approved by the Department prior to the delivery of such services when it is not otherwise approved by the Department within the service area. C. Each community centered board shall be approved by the Department to provide support services. D. The community centered board shall recommend to the Department a service agency for program approval and Medicaid certification only if it meets requirements set forth in Section 27-10.5, C.R.S., and rules of the Department.				silent
0215	RCF-DD license 24 month	VIII-3.3	The license for an Community Residential Home for Persons with Developmental Disabilities shall be valid for 24 months unless otherwise suspended or revoked.		Program Approval/Certification	Section 16.230	F. Program approval shall be renewed when, based on the results of the evaluation, the community centered board or service agency is found to be in substantial compliance with requirements pertaining to the program evaluated.				silent
0232	Change of ownership requirement & fees	VIII-3.4(C)(I)	Change of ownership shall be determined in accordance with the criteria set forth in 6 CCR 1011-1, Chapter II, Part 2. The change of ownership fee shall be:		CCB Designation	Section 16.210	A. Annually, any private corporation, for profit or not for profit, seeking designation as a community centered board shall submit an application for designation to the Department.				silent
0301	Governing body responsibilities	VIII-4.1	The governing body shall establish a policy that defines its composition and authority.		CCB/PASA	Section 16.210	B.2. The board of directors or trustees shall adopt specific bylaw provisions which insure that they are in compliance with all provisions of Section 27-10.5-105(2)(b), C.R.S.				

0302	Governing body oversight	VIII-4.2	The governing body shall oversee the policy, budget and operational direction of the facility. If a governing board oversees more than one facility, it shall maintain documentation concerning the oversight of each facility		CCB/PASA	Section 16.222	A. Community centered boards shall select and approve all developmental disabilities service agencies as defined in Section 16.221, A, 3, and any typical community service agency as defined in Section 16.221, A, 2, providing comprehensive services to provide authorized services in a designated service area in accordance with these rules and regulations unless otherwise noted in Section 16.230,				silent
0303	Governing body shall establish	VIII-4.3	The governing body shall establish a system for monitoring and reviewing the medical care and health of the residents receiving services at the facility.		CCB	Section 16.210	4. d. Quality of services and supports provided for persons with developmental disabilities. Quality shall be measured based on compliance with federal and state licensing or program approval requirements, accreditation reports, agencies' self-evaluation efforts, and Department's quality assurance monitoring activities. Other resources to evaluate quality that may be considered include: analysis of disputes and complaints, use of grievance procedures, and measures of satisfaction by persons receiving services or supports.				silent
0304	Governing body appoint administer	VIII-4.4	The governing body shall appoint an administrator who shall have the authority to implement the policies and procedures and be responsible for the day to day management of the facility.		CCB	Section 16.210	B.2. The board of directors or trustees shall adopt specific bylaw provisions which insure that they are in compliance with all provisions of Section 27-10.5-105(2)(b), C.R.S.				silent

0323	Administrator-annual review of policy & proc	VIII-5.3	The administrator, in consultation with one or more physicians and one or more registered professional nurses and other related professional health care personnel, shall develop and at least annually review appropriate written policies and procedures for the care of the residents, including, but not limited to, admission and transfer of residents; dental, diagnostic, dietary, medical and emergency care; nursing, pharmaceutical, physical and occupational therapy, training and social services as applicable.		Medical Policies	Section 16.623	A. Persons receiving comprehensive services and supports shall be assured of medical and dental services necessary to maintain the health of the person and to prevent further disability and shall have dentures, eyeglasses, hearing aids, braces and other aids or therapies as prescribed by an appropriate professional. 1. Each program approved service agency shall establish and implement written procedures for the appropriate procurement, storage, distribution and disposal of medications.				silent
0324	Quality Improvement exclusion	VIII-5.3(A)	A community residential home that submits a quality improvement plan to the Department for approval, and implements and maintains a quality management program in accordance with the approved plan shall be excluded from the requirement listed in section 5.3 of this chapter.				(Silent)				silent
0325	Administrator-accounting and audits	VIII-5.4	The administrator shall ensure that a recognized system of accounting is used to accurately reflect the details of the business. A fiscal audit, including resident funds that are managed by the facility, shall be performed at least annually by a qualified auditor independent of the facility.		Billing	Section 16.130	F. All regional centers, community centered boards, and service agencies shall provide information and reports as required by the Department including, but not limited to, data necessary for the Department's data system, COPAR, billing records, and legislative reports				silent

0401	Employ only qualified staff	VIII-6.1	The administrator shall only employ staff members who are qualified by education, training, and experience.		Qualified staff	Section 16.120 + 16.246	"Developmental Disabilities Professional" means a person who has at least a Bachelors Degree and a minimum of two (2) years experience in the field of developmental disabilities or a person with at least five (5) years of experience in the field of developmental disabilities with competency in the following areas. A. Community centered boards and program approved service agencies shall establish qualifications for employees and contractors (Host Home and other providers) and maintain records documenting the qualifications and training of employees and contractors who provide services pursuant to these rules and regulations.				
0405	Further inquiry into background check	VIII-6.2(A)	If any background check reveals prior convictions of a violent, fraudulent or abusive nature, the administrator shall inquire further to determine the potential impact on resident safety in accordance with facility policy.		Additional screening	Section 16.246	C. The community centered board in its role as support coordinating agency, as defined in Section 16.611, shall have screening procedures for individual providers who are not agency employees and for other entities providing services and supports.				silent
0407	Background check-document reason for hire	VIII-6.2(B)	If an individual is hired despite a background check that reveals a prior conviction of a violent, fraudulent or abuse nature, the administrator shall document the reasons for hire and plans for supervision.				(Silent)				silent

0419	Unsupervised time no more than 4 hours	VIII-6.6(C)	The unsupervised period does not exceed four (4) hours at a time			Section 16.625	C. Group Residential Services and Supports shall comply with the Colorado Department of Public Health and Environment Chapter VIII, Part 5 Rules and Regulations, in addition to these rules, and be licensed by the Colorado Department of Public Health and Environment.				silent
0420	Only 1 resident at a time unsupervised	VIII-6.6(D)	No more than one resident at a time shall be left unsupervised; and			Section 16.625	C. Group Residential Services and Supports shall comply with the Colorado Department of Public Health and Environment Chapter VIII, Part 5 Rules and Regulations, in addition to these rules, and be licensed by the Colorado Department of Public Health and Environment.				silent
0424	Residents do not perform staff functions	VIII-6.7	The administrator shall ensure that the facility does not depend upon residents to perform staff functions.			Section 16.625	C. Group Residential Services and Supports shall comply with the Colorado Department of Public Health and Environment Chapter VIII, Part 5 Rules and Regulations, in addition to these rules, and be licensed by the Colorado Department of Public Health and Environment.				silent
0453	Training specific to resident(s)	VIII-7.1(B)	Job training specific to the residents ' needs shall be provided to each staff member prior to that staff member working unsupervised with any resident. Such training shall include, at a minimum, medical protocols, therapy programs, activities of daily living needs, special services, and each resident ' s evacuation capabilities.		Interdisciplinary Team (IDT)	Section 16.440	A. Under the coordination and direction of the community centered board or regional center, the Interdisciplinary Team (IDT) shall develop the Individualized Plan (IP).				silent

0454	Training required within first 30 days	VIII-7.1(C)	Within the first 30 days of employment, staff shall receive training in resident rights, abuse and neglect prevention, reporting abuse, neglect, mistreatment and exploitation		Training MANE	Section 16.580	B. Community centered boards, program approved service agencies and regional centers shall have written policies and procedures for handling cases of alleged or suspected abuse, mistreatment, neglect, or exploitation of any person receiving services. These policies and procedures must be consistent with state law				silent
0457	Retraining and reevaluate competency	VIII-7.2(A)	If a staff member fails the annual competency evaluation, the administrator shall provide retraining and reevaluate to demonstrate competency is achieved.				(Silent)				silent
0528	15 day notice of termination	VIII-9.1(B)	The right to resident notice at least 15 days prior to the effective date when there is a decision to terminate services or transfer the resident		Termination	Section 16.410 + 16.420	Each community centered board and regional center, as appropriate, shall establish agency procedures sufficient to execute case management services according to the provisions of these rules and regulations. Such procedures shall include, but are not limited to 7. Termination and discharge. 2. If an individual is denied or terminated from such Title XIX Medicaid programs, a written notice shall be sent to the individual or his/her legal guardian in accordance with the provisions of Section 8.057.40, et seq. (10 CCR 2505-10).				

0530	Monitoring of abuse, neglect	VIII-9.1(D)	An effective monitoring mechanism to detect instances of abuse, mistreatment, neglect and exploitation. Monitoring shall include, at a minimum, a review of the following items.		Monitoring; Abuse and Neglect	Section 16.210 +	d. Quality of services and supports provided for persons with developmental disabilities. Quality shall be measured based on compliance with federal and state licensing or program approval requirements, accreditation reports, agencies' self-evaluation efforts, and Department's quality assurance monitoring activities. Other resources to evaluate quality that may be considered include: analysis of disputes and complaints, use of grievance procedures, and measures of satisfaction by persons receiving services or supports. 3 e. Devise and implement a plan for monitoring the programmatic practices of the community centered board and contracted service agencies, pursuant to Section 16.460 in these rules.				silent
0541	Staff aware of law, pol & proc with abuse neg	VIII-9.2(A)	All staff members are aware of applicable state law and facility policies and procedures related to abuse, mistreatment, neglect and exploitation,			Section 16.580	C. Any and all actual or suspected incidents of abuse, mistreatment, neglect, or exploitation shall be reported immediately to the agency administrator or designee. The agency shall ensure that employees and contractors obligated by statute, including but not limited to, Section 19-10-103, C.R.S., (Colorado Children's Code), Section 18-8-115, C.R.S., (Colorado Criminal Code - Duty To Report A Crime), and Section 26-3.1-101, C.R.S., (Social Services Code - Protective Services), to report suspected abuse, mistreatment, neglect, or exploitation, are aware of the obligation and reporting procedures.				silent

0545	Reporting the next business day	VIII-9.2(E)	Reporting of any alleged incident or occurrence to the parent, guardian or authorized representative within 24 hours, and to the department by the next business day consistent with 6 CCR 1011-1, Chapter 2, section 3.2; and		Reporting time Lines	Section 16.580	1. Within twenty-four hours of becoming aware of the incident, a written incident report shall be made available o the agency administrator or designee and the community centered board or regional center.				silent
0546	Investigated within 5 working days	VIII-9.2.(F)	All alleged incidents of abuse, mistreatment, neglect, injuries of unknown origin or exploitation shall be thoroughly investigated within five (5) working days. An investigative report shall be prepared that includes, at a minimum:		Investigation timelines	Section 16.580	D. All alleged incidents of abuse, mistreatment, neglect, or exploitation by agency employees or contractors shall be thoroughly investigated in a timely manner using the specified investigation procedures. However, such procedures must not be used in lieu of investigations required by law or which may result from action initiated pursuant to Section C, herein.				silent
0583	Financial records available	VIII-10.3	Upon request, the facility shall make a resident ' s financial record available to the resident, the resident ' s parents or legal guardian.		Financial Records	Section 16.243	B. The community centered board or program approved service agency shall submit financial reports in a format and manner prescribed by the Department, including but not limited to, an annual financial statement prepared in accordance with generally accepted accounting principles and Departmental policies.				silent

0602	Minimum information upon admission	VIII-11.1(A)	The following minimum information shall be recorded in the resident's program or medical record upon admission to the facility for persons with developmental disabilities		Minimum information of determination of eligibility	Section 16.420	The community-centered board shall have a written record of the determination of eligibility which, at a minimum, shall include: 1. The name of the applicant; 2. The date of birth; 3. The date of the determination of eligibility or ineligibility; 4. A statement as to the eligibility or ineligibility, and the rationale for the determination; 5. If eligible, the effective date of eligibility; and, 6. The name(s) of the person(s) and his/her title(s) involved in making the determination.				silent
0603	Name, previous address, and birth date	VIII-11.1(A)(1)	Name, previous address, and birth date		Records; Address (confidentiality)	Section 16.331	A. Identifying information regulated by this rule is any information which could reasonably be expected to identify the person seeking or receiving services or their family or contact persons, including, but not limited to, name, Social Security number, Medicaid number, household number or any other identifying number or code, street address, and telephone number, photograph, or any distinguishing mark. Identifying numbers assigned and used internally within a single agency shall be excluded from this regulation.				silent

0609	Assessments for the previous 12 months	VIII-11.1(B)(1)	The results of assessments conducted within the previous 12 months		SIS Assessment	Section 16.653	1. The decision shall be made by a case management supervisor meeting the qualifications of a Developmental Disabilities Professional as defined in Section 16.120. He or she shall: a. Document the rationale to support the decision which shall be kept in the client's record				silent
0610	Programs information	VIII-11.1(B)(2)	All individual service and support plans (ISSP) and service/individualized plans (SP/IP), as appropriate, developed within the previous 12 months		Programs	Section 16.440	A. Under the coordination and direction of the community centered board or regional center, the Interdisciplinary Team (IDT) shall develop the Individualized Plan (IP).				silent
0619	Resident funds	VIII-(11.2(A)(2)	A record of the use of the resident's funds including all debits, credits and a description of purchases if supervised by the licensee		Personal Needs Funds	Section 16.245	E. A community centered board or a program approved service agency managing personal needs funds shall purchase and maintain a surety bond in an amount specified by the Department, or provide an irrevocable letter of credit in the same amount, made payable to the state, to protect the personal needs of the person receiving services.				silent
0623	General personality characteristics	VIII-11.2(A)(6)	General description of personality characteristics;		Physical; personality	Section 16.612	3. Documentation of the effects of psychotropic medications and any changes in medication				silent
0624	Quarterly weight annual height	VIII-11.2(A)(7)	Quarterly weight and annual height measurement of all residents;		Physical; weight	Section 16.624 (IRSS)	d. weight taken annually or more frequently, as needed.				silent
0630	Entries dated and authenticated	VIII-11.2(B)	All entries in any resident record shall be dated and authenticated. Acceptable authentication shall be the staff 's written signature, identifiable initials, computer key, or other appropriate technological means		Records	Section 16.210	a. In accordance with reporting requirements of the Department's data system, maintain and update records of persons determined to be eligible for services and supports and who are receiving case management services and have an Individualized Plan, but for whom other services and supports are unavailable or who require additional services or supports				silent

0633	Medical record definition	VIII-11.3(A)	Medical records are those records pertaining to the health status and related medical services and treatments of the resident. Such records do not include documents involving services and programs.		Medical Records; definition		(Silent)				silent
705	General cleaning	VIII-12.3	The facility shall develop and implement procedures for handling soiled linen and clothing, storing personal care items, and general cleaning which minimizes the spread of pathogenic organisms		General cleanliness	Section 16.624 (IRSS)	4. Homes of persons receiving services and supports shall, at minimum, meet HUD Section 8 Housing Quality Standards. 5. The home (exterior and interior) and grounds shall be maintained: a. In good repair, b. To protect the health, comfort and safety of persons receiving services; and, c. Free of offensive odors, accumulation of dirt, rubbish and dust.				silent
0710	Protective isolation	VIII-12.3(b)	The protective isolation of residents who have an infectious disease; and		Infection		(Silent)				silent
0802	Meals planned 7 days in advance	VIII-13.2	Meals shall be planned seven (7) days in advance and in a manner that incorporates resident involvement.		Meals		(Silent)				silent
0806	Dietitian review	VIII.13.5	The facility shall have a qualified dietitian perform an initial review of all specialized, prescribed diet plans to ensure they meet diet guidelines and be available for consultation regarding any changes to the special dietary needs of the residents.		Dietitian review	Section 16.624 (IRSS)	1. The program approved service agency shall regularly monitor the diets of persons receiving services to determine their nutritional adequacy. 2. Therapeutic diets shall be prescribed by a licensed physician.				silent

0810	Assistance with eating as required	VIII013.9	Staff support shall be available to all residents who need assistance during meals.		Assistance; generally	Section 16.440	3. Document decisions made through the interdisciplinary team planning process including, but not limited to, rights suspension, the existence of appropriate services and supports, the actions necessary for the plan to be achieved, including which services and supports will be addressed through the development of an Individual Service and Support Plan (ISSP). The services and supports funded by the Department to be provided shall be described in sufficient detail as to provide for a clear understanding by the service agency(ies) of expected responsibilities and performance				silent
0902	Self-Administration Review	VIII 14.2	On at least a quarterly basis, facility staff shall review the medications and dosage taken by residents who are self-administering.		Self-Administration Review	Section 16.246	F. All employees and contractors, not otherwise authorized by law to administer medication, who assist and/or monitor persons receiving services in the administration of medications or the filling of medication reminder systems shall have passed a competency evaluation approved by the Colorado Department of Public Health and Environment.				silent
0904	Prescriptions Lawfully Labeled	VIII 14.3	Prescription medications shall be administered from containers or packages that are lawfully labeled.		Prescriptions Lawfully Labeled	Section 16.612	F. For persons receiving services who are assisted in the administration of medications by a person other than a relative, the following is required 2. Written orders by a licensed physician or dentist for all medications				silent

0906	Physician Review of Medication	VIII 14.4	The facility shall ensure that the primary care physician or other authorized, licensed practitioner designated to coordinate a resident's care reviews each resident's medication regimen on an annual basis for a stable regimen and whenever there is a change in the medication regimen.		Physician Review of Medication	Section 16.624 (IRSS) + 16.623	2. Each person receiving services shall receive a medical evaluation at least annually unless a greater or lesser frequency is specified by his/her primary physician. If the physician specifies an annual evaluation is not needed, a medical evaluation shall be conducted no less frequently than every two years. 3. The drug regimen of each person receiving services on prescription medication shall be reviewed and evaluated by a licensed physician no less often than annually and more frequently if recommended by the physician or required by law.				silent
0912	Medications Locked/Narcs Double Locked	VIII 14.6(A)	All medications shall be stored in locked containers according to the appropriate light and temperature conditions and all controlled medications shall be double locked.		Medication; safety	Section 16.623	a. All drugs shall be stored under proper conditions of temperature, light, and with regard for safety				silent
0916	QMAP's in Group Homes	VIII 14.6(B)(1)	A Community Residential Home for Persons with Developmental Disabilities may use qualified medication administration staff members (QMAPs) provided the facility fully complies with sections 25-1.5-301 through 25-1.5-303 C.R.S., and 6 CCR 1011-1, Chapter XXIV, Medication Administration Regulations.		QMAP's in Group Homes		(Contained in separate TA document)				silent

0955	Primary MD to Coordinate Care	VIII 15.3	Each resident shall have a primary care physician or other qualified, licensed practitioner designated to coordinate resident's care.		Primary MD to Coordinate Care	Section 16.623	8. Administration of psychotropic medications to a person receiving residential services and supports shalla. Be authorized through a time-limited prescription of no more than ninety (90) days by a fully licensed physician and reviewed at least annually by a psychiatrist				silent
0957	Dental every 2 years	VIII-15.4	The facility shall assist each resident in obtaining an annual dental examination. If the dentist determines that an annual examination is unnecessary, a dental examination shall be conducted at least every two (2) years. The facility shall document the prescribed frequency, results of all dental examinations and any required follow-up services.		Dental every 2 years	Section 16.624 (IRSS)	3. Each person receiving services shall be encouraged and assisted in getting a dental evaluation at least annually.				silent

0961	Annual Medical Exam	VIII 15.6	The facility shall arrange for a medical evaluation of each resident on an annual basis unless a greater or lesser frequency is specified by the primary care physician or other licensed, authorized practitioner designated to coordinate resident's care. If it is determined an annual evaluation is not needed, a medical evaluation shall be conducted at least every two (2) years. The facility shall document the results of such evaluations and any required follow-up services.		Annual Medical Exam	Section 16.623	A. Persons receiving comprehensive services and supports shall be assured of medical and dental services necessary to maintain the health of the person and to prevent further disability and shall have dentures, eyeglasses, hearing aids, braces and other aids or therapies as prescribed by an appropriate professional. C. The program approved service agency shall provide sufficient oversight and guidance and have established procedures to ensure that the health and medical needs of persons receiving services are addressed. The amount and type of guidance provided shall be directly related to an assessment of the person's capabilities. 2. Each person receiving services shall receive a medical evaluation at least annually unless a greater or lesser frequency is specified by his/her primary physician. If the physician specifies an annual evaluation is not needed, a medical evaluation shall be conducted no less frequently than every two years.				silent
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0965	Training in therapeutic & health services	VIII-15.7(A)	Therapeutic and health services may be provided by unlicensed staff only if such staff has been trained by a person licensed, certified, or otherwise authorized by law to provide such services.		Training in therapeutic & health services	Section 16.623	C. Therapy assessments shall be completed as the need for these is identified by the interdisciplinary team and/or physician. Based on these assessments, therapies shall be provided to maintain the health of the person receiving services, to prevent further disability and whenever possible, to improve the overall functioning of the person receiving services. 1. Therapy programs shall be periodically reviewed by a professional therapist from the relevant specialty area.				silent
0970	Devices in Good Repair	VIII 15.9	Wheelchairs and other assistive technology devices shall be maintained in good repair.		Devices in Good Repair	Section 16.623	2. Persons receiving services who use wheelchairs and other assistive technology services shall receive professional reviews, at a prescribed or recommended frequency, to ascertain the continued applicability and fitness of those devices.				silent
0974	P&P for Weight Monitoring	VIII 15.11	The governing body shall develop, and the administrator shall implement, a policy for monitoring each resident's weight. The policy shall include the following:		P&P for Weight Monitoring	Section 16.624 (IRSS)	5. Records shall contain documentation of d. weight taken annually or more frequently, as needed.				silent
0975	Weights Documented & Assessed	VIII 15.11(A)	Weight monitoring shall be documented and promptly assessed for significant/serious weight changes.		Weights Documented & Assessed	Section 16.624 (IRSS)	5. Records shall contain documentation of d. weight taken annually or more frequently, as needed.				silent
0980	Dentures, Glasses, Other Aids	VIII 15.13	Each resident shall have dentures, eyeglasses, hearing aids and other aids as needed and prescribed by the appropriate professional.		Dentures, Glasses, Other Aids	Section 16.623	A. Persons receiving comprehensive services and supports shall be assured of medical and dental services necessary to maintain the health of the person and to prevent further disability and shall have dentures, eyeglasses, hearing aids, braces and other aids or therapies as prescribed by an appropriate professional.				silent

1006	Unlicensed staff demonstrate competency	VIII-16.1(C)	Nursing staff shall monitor the care and treatment provided by unlicensed staff to ensure that unlicensed staff are trained and demonstrate competency in all procedures they perform. Changes in condition or needs shall be reported to the registered nurse or primary care provider.		Unlicensed staff demonstrate competency		(Silent)				silent
1132	Gastostomy Services for Several Residents	VIII 17.5	For unlicensed persons performing gastrostomy services for several residents with similar protocols, the licensed nurse or physician overseeing their training may document their proficiency with less than three (3) observations for each resident receiving services. The alternative method for establishing the proficiency of each staff member shall be documented.		Gastostomy Services for Several Residents	Section 16.800	2. Oversees training given to the unlicensed person and documents such training, as provided in Section 16.800, G, and directly observes the unlicensed person performing the gastrostomy services until such time as the unlicensed person reaches proficiency, which is defined as such person performing all aspects of the individualized protocol referred to above, at least three consecutive observations without error, and, B. For staff who are performing gastrostomy services for several individuals with similar protocols, the licensed nurse or physician overseeing their training may document their proficiency with less than three (3) observations for each individual receiving services. The alternative method for establishing proficiency of each staff shall be documented.				silent

1202	Occurrence Reporting Compliance	VIII 18.1	Each facility shall comply with the occurrence reporting requirements set forth in 6 CCR 1011-1, Chapter II, Part 3.2.		Occurrence Reporting Compliance	Section 16.560	A. Community centered boards, service agencies and regional centers shall have a written policy and procedure for the timely reporting, recording and reviewing of incidents which shall include, but not be limited to				silent
1206	Voluntary Closure Requirements	VIII 18.3	In the event of a voluntary closure of a facility, such facility shall notify the Department 30 days prior to closure and submit a plan for resident transfer at that time. The resident transfer plan shall include, at a minimum, the following:		Voluntary Closure Requirements	Section 16.622	8. Persons receiving services, guardians, authorized representatives, as appropriate, and the community centered board shall be notified at least fifteen (15) days prior to proposed changes in residential placements.				silent
1302	Emergency Plan - P&P	VIII 19.1	The governing body shall develop, and the administrator shall implement and update as necessary, an emergency preparedness plan that addresses the facility ' s response and staff duties in the following emergencies:		Emergency Plan	Section 16.440	6. Identify a contingency plan for how necessary care for medical purposes will be provided in the event that the person's family or caregiver is unavailable due to an emergency situation or to unforeseen circumstances.				silent
1602	Clean, sanitary & free from hazards	VIII-22.1	The facility shall maintain a home-like environment that is clean, sanitary, and free of hazards to health and safety.		Clean	Section 16.624 (IRSS)	The home (exterior and interior) and grounds shall be maintained a. In good repair, b. To protect the health, comfort and safety of persons receiving services; and, c. Free of offensive odors, accumulation of dirt, rubbish and dust.				silent

1606	Exterior Environment	VIII 22.3	All exterior areas shall be safely maintained to protect against environmental hazards including, but not limited to, the following:		Exterior Environment		The home (exterior and interior) and grounds shall be maintained				silent
1614	Compliance with Local Sewage Disposal	VIII 22.4(C)	Facilities shall be in compliance with all applicable state and local sewage disposal requirements. Sewage shall be discharged into a public sewer system or disposed of in a manner approved by state and local health authorities in compliance with the Water Quality Control Division ' s Guidelines on Individual Sewage Disposal Systems, 5 CCR 1003-6.		Compliance with Local Sewage Disposal		(Silent)				silent
1631	Interior Free from Accumulations	VIII 22.6(A)	All interior areas shall be free from accumulations of extraneous materials such as refuse, discarded furniture, and old newspapers.		Interior Free from Accumulations	Section 16.624 (IRSS)	8. Adequate and comfortable furnishings and adequate supplies shall be provided and maintained in good condition.				silent
1634	Garbage Containers	VIII 22.6(E)	All garbage and rubbish not disposed of as sewage shall be collected in impervious containers in such manner that it is not a nuisance or health hazard and shall be removed to an approved storage area at least once a day. The refuse and garbage storage area shall be kept clean and free from nuisance. The facility shall have a sufficient number of impervious containers with tight fitting lids that shall be kept clean and in good repair.		Garbage Containers	Section 16.624 (IRSS)	c. Free of offensive odors, accumulation of dirt, rubbish and dust.				silent
1651	Heat, Light, Ventilation in Each Room	VIII 22.8(A)	Each room in the facility shall have heat, lighting and ventilation sufficient to accommodate its use and the needs of the residents.		Heat, Light, Ventilation in Each Room		(Silent)				silent
1681	Regularly Designated Bedroom	VIII 22.11(A)	No resident shall be assigned to any room other than a regularly designated bedroom.		Regularly Designated Bedroom	Section 16.624 (IRSS)	7. Bedrooms shall meet minimum space requirements (single 80 square feet, double 120 square feet). (Not applicable for studio apartments.)				silent

Comments
revise all rules for person first language

review the term
"administrator"

CDHS rules do not separate GRSS and IRSS. The definitions are incorporated into other section of rules. Comprehensive Services is an outdated term. Effective 2014 "operating agency" will need to be removed

Revise definition to include
new DD definition

CDPHE rules are written for
facilities. DHS and HCPF rules
address services.

put PASA information. .
Would governing body
include board of directors.
Consider revising the term
facility to "group home"

Update language to ICF-IID.
Compare with federal
language.

CDPHE - life safety now has
this rule this entire row can be
removed

consider removing admitted
and replace with living.
Review the term client and
consider individual receiving
services

HCPF does have rules for
provider enrollment as
Medicaid Providers. There
aren't rules specific to
agencies serving people with
disabilities. Consider
streamlining certification,
approval and licensing
process. Facility vs. agency

Statutory requirement for
CDPHE. Parking Lot - is the
750 feet the right practice.
How does this relate to the
Keys Amendment?

There are separate Medicaid
Provider enrollment rules.
Parking Lot - review and
streamline approval,
certification, and licensure.
Column H needs revised as
CCBs no longer approves
PASAs.

CDPHE recommending that agencies get license first and not be tied to Program Approval. Remove CCB approval requirement. Copy language from other spreadsheet document.

see CDPHE comment

DHS CCB designation isn't related. Is there any change of ownership regs in DHS or HCPF. Candie to Follow-up.

Candie to follow up.

Revise rule as CCBs do not approve agencies. This recommendations should apply to all rules that reference CCB approval. Are these two separate references.

Revise rule as CCBs do not approve agencies. This recommendations should apply to all rules that reference CCB approval. Are these two separate references.

Revise rule as CCBs do not approve agencies. This recommendations should apply to all rules that reference CCB approval. Are these two separate references.

Strike CDHS ref here...belongs
at Plan of Care. Also, we'll
need to answer how this
interacts with self-
determination/self direction
of services.

Will probably come out for
DD group homes? Will
instead be covered in general
licensing standards. This can't
be struck...

Technical change: COPAR can
be struck

Need to attend carefully to what Rule requires agency's to do vis-à-vis independent contractors...Parking Lot.

Review Trust, but Verify document

Consider referencing Abuse Registry

People who live in GRSS settings should be able to exceed four hours of unsupervised time as appropriate to meet the client's needs and in accordance with the Service Plan
CDPHE is already reviewing this rule to state unsupervised time will be in accordance with the client's Service Plan

consider rewording column B

find DHS rule for client specific training. Otherwise review the work "direct"

parking lot issue - occurrence
reporting requirements
conflict with CIR requirements
and MANE investigations

include language about
retraining and reevaluation if
the employee is retained .
Consider adding "at
minimum" for competency
evaluation
Recommend time periods for
providing due process should
be consistent across state
agencies. Evaluate ways to
streamline written notices
that are sent to clients and
family members. Provide
consistent direction of
calendar vs business days

incident vs occurrence reports

double check DHS rules for
language re: monitoring and
detecting incidents of MANE

include MANE investigations
in the conversation about CIR
and OR. Who has jurisdiction
and when to contact law
enforcement and APS

line up columns

review timeframe for CDPHE
investigation. Occurance
Advisory committee is
reviewing the exemption
process

need to review PNF Manual
and compare to CDPHE

find client record rules

find client record rules

find client record rules

find client record rules
language change to Service
Plan

client record

likes and dislikes

language from H plus height

clarify electronic signatures in
DHS and HCPF. Recommend
accepting electronic
signatures

Review the language
separating medical and
program records

Move the HUD requirements

CDC defines protective
isolation. Concern that
protective isolation deters
from "normalcy."
reword - meals shall be
planned in a manner that
incorporates resident
involvement
Emily to research is dietary
review is a State Plan benefit.
Consider changing from
dietian review to include also
primary care physician or RN.

remove DHS language
strikethrough

remove DHS language
strikethrough

remove DHS language
strikethrough

research 90-day review for
psychiatrist

review CDPHE rule to either
allow medications to be
unlocked

Get the TA document

The CDPHE and DHS rules don't relate. Research the 90-day review criteria for psychotropic medications. Clarify CDPHE rules regarding the role and responsibility of the PCP such as oversee the resident's medical care. Avoid the use of the work "cordinate" due to the relation to care coordination

update language to every six months to unless otherwise noted by the dentist or physician.

Clarify CDPHE rules regarding the role and responsibility of the PCP such as oversee the resident's medical care. Avoid the use of the work "cordinate" due to the relation to care coordination. Review language "prevent further disability" consider "maintain optimal health" or highest practicable health"

Review language "prevent further disability" consider "maintain optimal health" or highest practicable health"

revise CDPHE and DHS rules to use CDPHE rules and add with professional review and within the manufactor guidelines.

see weight comment above

see weight comment above

prevent further disability comments. Review the word assured

issues for discussion with
CLAG - Nurses concerned
about nursing delegation act.
Reimbursement rate for GRSS
includes nursing and cannot
be claimed separately.

inconsistency between two
sets of rules DHS says
consecutive observation
without error. Use CDPHE
language

HCPF invited to group to discuss process with OR, IR, CIR CDPHE and DHS has ongoing group.25-1-124 (OR) During future meeting review OR requirements with IR and CIR requirements. Who is the HCPF contact (Whitney) Report back by March 1

concern about 15 days and should it be 30. Does this relate to the dispute resolution procedure. FOLLOW-UP

DHS remove medical care.

CDHS language refers only to IRSS

CDHS language refers only to
IRSS

Green Rows - removed and
transferred to Division of Life
Safety. Judy will see if
someone will attend our
meeting.

CDHS language refers only to
IRSS

CDHS language refers only to
IRSS

IRSS rules refer to compliance
with HUD requirements.

CDHS revisit sq footage to
align with CDPHE

Item 0113

Item 0114

118

120

121

HCPF - Program Approved Services Agency means a developmental disability service agency or a typical community service agency as defined in 2 CCR 503.1 16.000 et seq., that has

DHS - "Program Approved Service Agency" means a developmental disabilities service agency or typical community service agency as defined in Section 16.221, which has received program

HCPF - GRSS means residential habilitation provided in group living environments of four to eight clients receiving services who live in a single residential setting, which is licensed by the CDPHE as a residential care facility or residential community home for persons with

DHS - "Comprehensive Services" means habilitation services and supports that provide a full day (24 hours) of services and supports to ensure the health, safety and welfare of the individual, and to provide training and habilitation services or a combination of training and supports in the areas of personal, physical, mental and social development and to promote interdependence, self-sufficiency and community inclusion. Services include residential

HCPF - COMMUNITY CENTERED BOARD (CCB) means a private corporation, for profit or not for profit, which when designated pursuant to Section 27-10.5-105, C.R.S., provides case management services to clients with developmental disabilities, is authorized to determine eligibility of such clients within a specified geographical area, serves as the single point of entry for clients to receive services and supports under Section 27-10.5-101, C.R.S. et seq , and provides authorized services and supports to such clients either directly or by purchasing such

DHS - "Community Centered Board (CCB)" means a private corporation, for profit or not for profit, which, when designated pursuant to Section 27-10.5.105, C.R.S., provides case management services to persons with developmental disabilities, is authorized to determine eligibility of such persons within a specified geographical area, serves as the single point of entry for persons to receive services and supports under section 27-10.5, C.R.S., and provides

DHS - "Program Approved Service Agency" means a developmental disabilities service agency or typical community service agency as defined in Section 16.221, which has received program

DHS - "Client" means an individual who has met Long Term Care (LTC) eligibility requirements and has been offered and agreed to receive Home and Community Based Services (HCBS) in the Children's Extensive Supports (HCBS-CES) waiver, the HCBS waiver for Persons with

HCPF - CLIENT means an individual who has met long term care (LTC) eligibility requirements, is enrolled in and chooses to receive LTC services, and receives LTC services.